

# Welch Allyn Ear Wash System

## 2010 REIMBURSEMENT INFORMATION



### CPT® CODING OPTIONS FOR USE OF EAR WASH SYSTEM AND MEDICARE FEE SCHEDULE

Code	Description	National Average <sup>1</sup>	Alabama	San Francisco
69210	Removal of impacted cerumen (separate procedure), one or both ears	\$31.75 Facility**	\$29.15 Facility	\$35.13 Facility
		\$46.91 Non-Facility***	\$42.08 Non-Facility	\$56.97 Non-Facility
G0268	Removal of impacted cerumen (one or both ears) by physician on same date of service as audiologic function testing	\$31.39 Facility	\$29.36 Facility	\$36.09 Facility
		\$47.99 Non-Facility	\$43.52 Non-Facility	\$60.01 Non-Facility

Fee schedule as of 1/1/2010.

For reference only. Information does not constitute a guarantee of coverage or payment.

<sup>1</sup> National Average Medicare Physician Fee Schedule Amounts: 70 Fed. Reg. 68132-68215 (2005) (to be codified at 42 CFR § 484).

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\*\*Facility: Includes hospitals (inpatient, outpatient, and emergency department), ambulatory surgical centers (ASCs), and skilled nursing facilities (SNFs).

\*\*\*Non Facility: Includes all other settings.

#### MEDICARE Coverage

Use of the Ear Wash System in the physician office is usually covered by Medicare when medically necessary for the removal of impacted cerumen and when a significant amount of physician or physician-supervised work is required.

**Note:** Simple cerumen removal or removal performed by office personnel may be included with the evaluation and management (E/M) service and not paid separately.

When cerumen removal is billed with an E/M code, modifier -25 may be indicated to identify the E/M as a significant, separately identifiable service.

#### PRIVATE INSURANCE Coverage

Use of the Ear Wash System in the physician office may be covered by private payers when medically necessary.

#### Coding

Coding options for use of the Ear Wash System vary by payer and by plan. Report use of the Ear Wash System using:

**69210** Removal of impacted cerumen (separate procedure), one or both ears

**Note:** When cerumen removal is billed with an E/M code, modifier -25 may be indicated to identify the E/M as a significant, separately identifiable service.

#### MEDICAID Coverage

Use of the Ear Wash System in the physician office may be covered by Medicaid programs when medically necessary.

#### Coding

Confirm coding with individual states or call the Customer Care Line for assistance.

## OTHER CONSIDERATIONS

- Include documentation in the patient's records to indicate medical necessity for a separate service, including:
  - Reason for patient encounter
  - Patient symptoms
  - Whether otoscopic examination of the tympanic membrane is possible
  - Who performs the service
  - Time and effort spent in performing procedure
- Confirm that proper ICD-9-CM diagnosis codes are reported to justify medical necessity of removal of impacted cerumen.
- Some payers may have specific requirements for using certain codes, including prior authorization, restricted medical diagnoses, or specialty provider types.

Be sure to confirm the requirements and specific coding, coverage, medical necessity, and reimbursement guidelines of the payer you are billing before submitting claims by reviewing your managed care contracts, consulting the *Physicians' Current Procedural Terminology, Fourth Edition (CPT-4)* or *The Federal Register*, or contacting provider services.

Please visit our website at [welchallyn.com/support/customer/service-guarantee.htm](http://welchallyn.com/support/customer/service-guarantee.htm) for additional reimbursement support, a list of frequently asked questions and brochures.

Contact the Welch Allyn Customer Care Line at 1.800.535.6663

Monday through Friday, 9 AM to 5 PM EST for current physician fee schedules for your specific location.

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